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FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	For Other Than An Author	ized Committee	Office Use (Only
NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT ₩	Example:If typing, type over the lines		
American Society of Pensior	n Professionals & Actuaries PAC			
ADDRESS (number and street)	4245 N Fairfax Drive			
Check if different	Suite 750			
than previously reported. (ACC)	Arlington		VA 2220	03 - 1637
2. FEC IDENTIFICATION NUM	MBER ♥ CITY	ı	STATE A ZIF	PCODE A
C00333104	3. IS THE		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Feb 20	(M2) May 20 (M5	H	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Mar 20	(M3) Jun 20 (M6	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15	Apr 20	(M4) Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
Quarterly Report(C	Q1) (c) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
Quarterly Report(C	Q2) PRE-Election Report for the:	Convention (12C)	Special (12S)	_
Quarterly Report(C	Q3)			
January 31 Quarterly Report(Y	YE) Election of			the tate of
July 31 Mid-Year Report(Non-election Year Only) (MY)	on (d) 30-Day Post -Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	rt Report for the.			the tate of
5. Covering Period 0	8 01 2010	through 08	31 2010	
I certify that I have examined this	Report and to the best of my knowle	dge and belief it is true, corre	ct and complete.	
Type or Print Name of Treasurer	Mr. Brian H. Graff, Esq.			
Signature of Treasurer Electron	onically Filed by Mr. Brian H. Graf	f, Esq.	Date 0 9 1 6	2010
NOTE : Submission of false, erro	oneous, or incomplete information ma	ay subject the person signing	this Report to the penalties of	2 U.S.C 437g.
Office Use				ORM 3X 12/2004)

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/10

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name American Society of Pension Professionals & Actuaries PAC

D D " D 08 0 1 2010 0.8 31 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 104007.00 January 1 (b) Cash on Hand at 82532.92 Begining of Reporting Period 2175.00 62681.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 84707.92 166688.00 6(a) and 6(c) for Column B) 4659.83 86639.91 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 80048.09 80048.09 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 10

Write or Type Committee Name

American Society of Pension Professionals & Actuaries PAC

Report Covering the Period:

From:

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то.

м м 0 8 D D 31

Y Y Y Y 2 0 1 0

I. Receipts	eceipts COLUMN A Total This Period			
. Contributions (other than loans) From: (a) Individuals/Persons Other				
Than Political Committees (i) Itemized (use Schedule A)	1675.00	52950.00		
(ii) Unitemized	200.00	8431.00		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1875.00	61381.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	300.00	300.00		
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2175.00	61681.00		
2. Transfers From Affiliated/Other Party Committees	0.00	0.00		
3. All Loans Received	0.00	0.00		
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00		
6. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	1000.00		
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00		
. Transfers from Non-Federal and Levin Funds				
(a) Non-Federal Account (from Schedule H3)	0.00	0.00		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00		
D. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2175.00	62681.00		
. Total Federal Receipts (subtract Line 18(c) from Line 19)	2175.00	62681.00		

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 10

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: — (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	450.00	0000.04
	Expenditures	159.83	2639.91
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	159.83	2639.91
2.	Transfers to Affiliated/Other Party		
3	Committees	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	4500.00	84000.00
	Independent Expenditure		
	(use Schedule E)	0.00	0.00
٥.	Coordinated Experiments Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
Ο.	25dil Topaymonto Made		
	Loans Made Refunds of Contributions To:	0.00	0.00
ο.	(a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
^	Fordered Floration Antivity (OLL C.O. 404 (00))		
J.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6)	2.22	0.55
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	2.22	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4659.83	86639.91
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	4659.83	86639.91

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
33. Total Contributions (other than loans) from Line 11(d), page 3)	2175.00	61681.00			
44. Total Contribution Refunds (from Line 28(d))	0.00	0.00			
Net Contributions (other than loans) (subtract Line 34 from Line 33)	2175.00	61681.00			
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	159.83	2639.91			
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00			
8. Net Operating Expenditures (subtract Line 37 from Line 36)	159.83	2639.91			

FE6AN026

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 10 (check only one) X 11a
4	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Society of Pension Professi	onals & Actu	uaries PAC	
	Full Name (Last, First, Middle Initial) John Halchuck			Date of Receipt
	Mailing Address 230 Windsor Dr			08 04 2010
	City Cortland	State OH	Zip Code 44410	Transaction ID: SA11AI.9741
	FEC ID number of contributing federal political committee.	C	44410	Amount of Each Receipt this Period 500.00
	Name of Employer AMI Benefit Plan Administ- ratio	Occupatio Plan Adn	n ninistrator	Contribution
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Craig P Hoffman			Date of Receipt
	Mailing Address 1660 Prudential Drive Suite 400			0 8 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.9740
	<u>Jacksonville</u>	FL	32207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00 Contribution
	Name of Employer SunGard Corbel	Occupatio Pension	n consultant	Continuation
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
_	Full Name (Last, First, Middle Initial) Patricia M Monju			Date of Receipt
	Mailing Address 400 Poydras Street Suite 1840			0 8 2 4 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.9747
	New Orleans	LA	70130-3245	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00 Contribution
	Name of Employer Horne Business Services, LLC		consultant	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
	SUBTOTAL of Receipts This Page (optional)	•		1050.00

A.

В.

PAGE 7/10 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Pension Professionals & Actuaries PAC Full Name (Last, First, Middle Initial) Date of Receipt Richard Unser Mailing Address 725 S. Figueroa, 35th Floor 0 8 24 2010 City State Zip Code Transaction ID: SA11AI.9748 Los Angeles CA 90017 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Contribution Name of Employer Lockton Occupation Risk Management Consultant Receipt For: Aggregate Year-to-Date General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) Lynn M Young Date of Receipt Mailing Address 2415 E Cambelback Road 8 0 24 2010 Suite 960 City State Zip Code Transaction ID: SA11AI.9750 **Phoenix** ΑZ 85016-4209 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Contribution Name of Employer Coble Pension Group, LLC Occupation Pension consultant Receipt For: Aggregate Year-to-Date Primary General 1375.00

SUBTOTAL of Receipts This Page (optional)	•	625.00
TOTAL This Period (last page this line number only)	•	1675.00

Other (specify)

A.

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 10 (check only one) 11a 11b X 11c 12 13 14 15 16 17
	d Statements may not be sold or used by any personant the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Pension Profes	ssionals & Actuaries PAC	
Full Name (Last, First, Middle Initial) CUNA MUTUAL INSURANCE SOCIETY POl Mailing Address 5910 Mineral Point Mail Stop 5910 4 A2		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11C.9745
Madison	WI 53701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	- Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	•	300.00
TOTAL This Period (last page this line number only)	<u>,</u>	300.00

SCHEDULE B (FEC Form 3X)		Use separate schedule(s)		FOR LINE (check onl			E NUMBER: PAGE 9/10						
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		X	21b 27	22 28a		23 28b	24 280	<u>.</u> F	25 29	26 30l
	ny Information copied from such Reports and Statem for commercial purposes, other than using the name												
	NAME OF COMMITTEE (In Full) American Society of Pension Professionals							1001	10110 11	<u> </u>			
. <u> </u>	Full Name (Last, First, Middle Initial) American Express							: SB21	B.97	762			
	Mailing Address Post Office Box 53852						0 ^M 8			0 3 /	Y	2 o 1 c	Y
		State AZ	Zip Code 85072-3852				Amou	ınt o	f Each	Disburs	emer	nt this F	Period
	Purpose of Disbursement				001		L.		•		_	7.95	
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	Mailing Address Post Office Box 53852							M		ement	YZ	o i c	Y
		State AZ	Zip Code 85072-3852				Amou	ınt o	f Each	Disburs	emer	nt this F	Period
	Purpose of Disbursement				001		L.	_				2.95	
	Candidate Name			С	atego Type	-							
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼										
÷.	Full Name (Last, First, Middle Initial) SunTrust Bank						Date of	of D	isburs	: SB21 ement	B.97	765	
	Mailing Address Post Office Box 85024						0 ^M 8	М	/ D	10 /	YZ	2 0 1 c	Y
	Richmond	State VA	Zip Code 23285-5024				Amou	int o	f Each	n Disburs			
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ĮŢ	TOTAL This Period (last page this line number only)											06.23	

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or committee. NAME OF COMMITTEE (In Full) American Society of Pension Professionals & Actuaries PAC Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC Mailing Address 175 SOUTH WEST TEMPLE SUITE 650 City SALT LAKE CITY UT 84101 Purpose of Disbursement Contribution Candidate Name Office Sought: I house President VA 22314 Purpose of Disbursement For: VA 22314 Purpose of Disb	SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)	FOR LINE (check only	
NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) American Society of Pension Professionals & Actuaries PAC Full Name (Last, First, Middle Initial) HATCH ELECTION COMMITTEE INC Mailing Address 175 SOUTH WEST TEMPLE SUITE 650 City Slate Zip Code UT 84101 Purpose of Disbursement Contribution Candidate Name Office Sought: House X Senate President VA 22314 City State Zip Code Other (specify) ▼ State: UT District: Full Name (Last, First, Middle Initial) PROSPERITY PAC Mailing Address 1006 Pendleton Street City State Zip Code VA 22314 City State Zip Code VA 22314 Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President VA 22314 City State Zip Code VA 22314 Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President VA 22314 Disbursement For: 2010 State: District: Full Name (Last, First, Middle Initial) WYDEN FOR SENATE Mailing Address PO BOX 3498 Ofty PORTLAND Office Sought: House Senate President State: Disbursement Contribution Candidate Name Ofty PORTLAND Office Sought: House Senate President State: Disbursement Contribution Candidate Name Ofty PORTLAND Office Sought: House President State: Disbursement Contribution Candidate Name Ofty PORTLAND Office Sought: House President State: Disbursement Contribution Candidate Name Ofty Portland President State: Disbursement Contribution Candidate Name Ofty Portland President State: Disbursement Contribution Candidate Name Ofty Portland President State: Disbursement Contribution Candidate Name Ofty President State: Disbursement Contribution Candidate Name Ofty Portland President State: Disbursement For: 2010 President State: On Disbursements This Page (optional) Other (specify) ▼ Type Oftice Sought: House President State: Disbursement	ITEMIZED DISBURSEMENTS		21b 27	22 X 23 24 25 2 28a 28b 28c 29 3
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Mailing Address 175 SOUTH WEST TEMPLE SUITE 650	•			Date of Disbursement
SALT LAKE CITY Purpose of Disbursement Contribution Candidate Name Office Sought: Name Persident	Mailing Address 175 SOUTH WEST T	EMPLE SUITE 650		$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & R \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ D & D & D \end{smallmatrix} \end{bmatrix}$
Contribution Candidate Name Office Sought:				Amount of Each Disbursement this Period
Office Sought: House X Senate President State: UT District: Full Name (Last, First, Middle Initial) PROSPERITY PAC Mailing Address 1006 Pendleton Street City Senate President VA 22314 Purpose of Disbursement Contribution Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) VA 22314 Transaction ID: SB23.9758 Date of Disbursement this Pendleton Street Transaction ID: SB23.9758 Date of Disbursement this Pendleton Street Amount of Each Disbursement this Pendleton Street Office Sought: House President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) WYDEN FOR SENATE Mailing Address PO BOX 3498 City PORTLAND OR 97208 Purpose of Disbursement Contribution Candidate Name Contribution Candidate Name Office Sought: House President State: Disbursement Contribution Candidate Name Office Sought: House President State: OR Disbursement Cother (specify) ▼ State: OR Disbursement This Page (optional)	Contribution			1000.00
PROSPERITY PAC Mailing Address 1006 Pendleton Street City Alexandria VA 22314 Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) WYDEN FOR SENATE Mailing Address PO BOX 3498 City PORTLAND Office Sought: State Zip Code Other (specify) ▼ City PORTLAND OFFIce Sought: State Zip Code OR 97208 Purpose of Disbursement Contribution Candidate Name City PORTLAND OFFIce Sought: State Zip Code OR 97208 Purpose of Disbursement Contribution Candidate Name Office Sought: House President State Zip Code OR 97208 Purpose of Disbursement Contribution Candidate Name Office Sought: House President State: Other (specify) ▼ State: OR District: O0 Subtrotal of Disbursement For: 2010 Category/ Type Office Sought: House President Other (specify) ▼ State: OR District: O0 Amount of Each Disbursement this Pen Amount of Each Disbursement this Pe	χ Senate President	X Primary General	Туре	
City Alexandria Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) WYDEN FOR SENATE Mailing Address PO BOX 3498 City PORTLAND Purpose of Disbursement For: City PORTLAND Purpose of Disbursement Contribution Candidate Name Office Sought: I house Senate President Other (specify) State Zip Code OR 97208 Amount of Each Disbursement this Pen 1000.00 Transaction ID: SB23.9759 Date of Disbursement Mailing Address Date of Disbursement Mailing Address Office Sought: Office Sought: House X Senate President State: OR Disbursement For: 2010 Amount of Each Disbursement this Pen 2500.00 Subgrave Amount of Each Disbursement this Pen Office Sought: Office Sought: Office Sought: Name (Last, First, Middle Initial) Name (Last, First, Middle Initial) Transaction ID: SB23.9759 Date of Disbursement Office Sought:	,			Date of Disbursement
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Office Sought: House Senate Primary X General Primary X General Other (specify) ▼ State: District: Tull Name (Last, First, Middle Initial) WYDEN FOR SENATE Mailing Address PO BOX 3498 City PORTLAND OR 97208 Purpose of Disbursement Contribution Candidate Name Office Sought: House X Senate Primary X General Other (specify) ▼ Office Sought: House X Senate Primary X General Other (specify) ▼ State: OR District: 00 SUBTOTAL of Disbursements This Page (optional)	Contribution			1000.00
Senate	Candidate Name			
WYDEN FOR SENATE Mailing Address PO BOX 3498 City State Zip Code PORTLAND OR 97208 Purpose of Disbursement Contribution Candidate Name Office Sought: House X Senate President President State: OR District: 00 SUBTOTAL of Disbursements This Page (optional) Date of Disbursement Date of Disbursement Disbursement For: 2010 Cardidate Name Disbursement For: 2010 Primary X General Other (specify) ▼ 4500.00	Senate President	Primary X General		
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PORTLAND OR 97208 Purpose of Disbursement Contribution Candidate Name Office Sought: House X Senate Primary X General President President State: OR District: 00 SUBTOTAL of Disbursements This Page (optional) A 500.00	Mailing Address PO BOX 3498			08 11 1 2010
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COST OTAL OF BIOCHTONIA THIS T AGE (OPHONIA)		ol)		4500.00